PTO/SB/06 (08-03)

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Substitute for Form P10-675										
CLAIMS AS FILED - PART I (Column 1) (Column 2)						SMALL ENTITY		OR	OTHER THAN SMALL ENTITY	
FOR NUMBER FILED NUMBER E			EXTRA	RATE	FEE		RATE	FEE		
BASIC FEE (37 CFR 1.16(a))						<i>:3</i> 25	OR		<u>,790.4</u>	
TOTAL	CLAIMS R 1.16(c))		minus 20 = *			x 205=		OR	x :50 =_	
INDEF	ENDENT CLAIM	is .	minus 3 = *			x s 100		OR	× : 200	
(37 CFR 1.16(b)) minus 3 = MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))						Q81s+		OR	+5360	
					TOTAL		OR	TOTAL		
* If the difference in column 1 is less than zero, enter *0* in column 2. TOTAL OR TOTAL OR										
CLAIMS AS AMENDED – PART II										
	(Column 1) (Column 2) (Column 3)				SMALL E	NTITY	OR		ENTITY	
۲.	3/11/05	CLAIMS REMAINING AFTER		HIGHEST NUMBER PREVIOUSLY	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
말	Total	AMENDMENT	Minus	PAID FOR	=	× 365 =	rec	OR	x 500=	
AMENDMENT	(37 CFR 1.16(c))	<u>au</u>	Minus	24	-	Jan			200	
	(37 CFR 1.16(b))					× s tay		OR	3/20	
₹	FIRST PRESENT	TATION OF MULTIPLE	DEPENDE	NT CLAIM (37 CFI	R 1.16(d))	+ \$ / (C)(=)		OR	TOTAL	
						ADD'L FEE		OR	ADD'L FEE	
(Column 1) (Column 2) (Column 3)								7		
B F		CLAIMS REMAINING AFTER		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
Ä	Total	AMENDMENT	Minus	**	=	x 5 <u>25</u> <u></u>		OR	x 5 0	
ᄝ	(37 CFR 1.16(c)) Independent	•	Minus	***	=	x s 100		OR	× 2000	
AMENDMENT	(37 CFR 1.16(b))			- 127 CLANA (27 CE	D 1 16(d))	190		OR	208:+	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))						TOTAL	 	OR	TOTAL ADD'L FEE	
	4					ADD'L FEE	<u> </u>		ADDLICE	L
		(Column 1)		(Column 2) HIGHEST	(Column 3)			7		
O F		CLAIMS REMAINING AFTER		NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
É	Total	AMENDMENT	Minus	**	=	x \$25=		OR	× \$ <u>50</u> =	
AMENDMENT	(37 CFR 1.16(c)) Independent		Minus	***	=	x s 100		OR	x <u>3</u> 000	
	(37 CFR 1.16(b)) FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					+ \$ 180	T	OR	+ ,360	
FIRST PRESENTATION OF MULTIPLE DEPENDENT COMM (37 G) (1.10(4))						TOTAL	1	OR	TOTAL ADD'L FEE	\top
and the state of the state of the control in column 2 write "0" in column 3.										
** If the "Highest Number Previously Paid For In THIS SPACE is less than 20, miter 20.										
*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter 3. The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.										

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This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for requiring this burden, should be sent to the Chief Information Officer, U.S. Patent on the amount of time you require to complete this form and/or suggestions for requiring this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS and Trademark Office, U.S. Department of Patents, P.O. Box 1450, Alexandria, VA 22313-1450.